

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.       | DATE                 |
|---------------------------|----------|--------------|----------------------|
| FEE DETERMINATION         |          |              |                      |
| O.I.P.E. CLASSIFIER       |          |              |                      |
| FORMALITY REVIEW          | RW       | 12<br>JC4949 | 11/16                |
| RESPONSE FORMALITY REVIEW | TC       | JC4942       | 12/28/00<br>01/23/01 |

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

| Claim | Date     |
|-------|----------|
| 1     | Original |
| 2     | 2/06/01  |
| 3     | 11/16/00 |
| 4     | 6/18/02  |
| 5     | 11/29/02 |
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| Claim | Date     |
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| Claim | Date     |
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If more than 150 claims or 10 actions  
 staple additional sheet here